

IN THE SPECIFICATION

Please amend the below identified paragraphs as indicated, strike through deleted, underlined added:

>Page 1, 1st full ¶, i.e., the paragraph immediate following the title;

This is a continuation of U.S. application Serial No. 09/943,975 filed August 31, 2001, now U.S. Pat. No. 6,719,709, issued April 13, 2004 which is a regular application filed under 35 U.S.C. §111(a) claiming priority under 35 U.S.C. §119(e)(1), of provisional application Serial No. 60/229,143 having a filing date of August 31, 2000, filed under 35 U.S.C. §111(b), as well as provisional application Serial No. 60/264,700 having a filing date of January 30, 2001, filed under 35 U.S.C. §111(b).

>Page 12, 1st full ¶, i.e., the paragraph immediate following the heading SUMMARY OF THE INVENTION, change "physiologically" to --physiological-- at line 10;

The subject invention, whether it be the assembly, or the attendant methodology, provides for the easy acquisition of reliable diagnostic information by allowing the patient's true urination patterns to be observed and the ~~physiologically~~ physiological workings of the prostatic urethra ascertained in association therewith.

>Page 25, 1st and only full ¶, change "ask" to --asked-- at line 8;

To perform a first differential diagnostic procedure, the bladder 200 needs to contain either urine or be filled with fluid. A minimum bladder volume to initiate a micturition cycle is about 200 cc, and in some patients with decompensated bladders, as much as 400 or even 600 cc may be required. The volume of fluid required in the filling of the bladder is significant and essential information in any bladder diagnostic procedure. Once bladder 200 is filled, the patient is ~~ask~~ asked to stand or sit up and urinate. The urination is either performed into a portable urinal, or a uroflowmetry machine which will record the rate of flow and volume collected. As the patient voids the body 14 of the assembly 10 is held stationary while the graduated support member 12 is gradually retracted. By observing the appearance of the fluid flow as the graduated support member 12 is moved longitudinally, any obstruction within the urethra 270, more particularly, in that region (i.e., length) proximally adjacent the free end 24 of the support member 12, will compress the radially responsive segment 16 of the body 14. As may be appreciated, the relatively radially rigid surface of the graduated support member serves a function of selectively supporting (i.e., stenting) at least the radially responsive segment 16 of the body 14 of the assembly 10.